

MINUTES

Thursday, 10 April, 2008
10:00 – 17:00

Welcome: Högni Óskarsson, Ulrich Hegerl

Ulrich Hegerl and Högni Óskarsson opened the meeting and welcomed everyone to Reykjavík. Proxies and co-workers of EAAD members were introduced: Siska de Jong (attending for Christina van der Feltz, the Netherlands), Erzsébet Németh (attending for Mária Kopp, Hungary), Salbjörg Bjarnadóttir (co-worker of Högni Óskarsson, Iceland) and Roma Robertson (attending for Margaret Maxwell, Scotland).

Update EAAD Project Office: Katrin Gottlebe

Katrin Gottlebe updated the partners about the status of the second and third EC instalment. The second instalment was received by the project office in March and was immediately transferred to the partners in the last week of March. The interim report and the request for the third instalment was submitted in due time on 28 February 2008.

NOTE:

The project office received a message from Stephan Van den Broucke on 17 April that the interim report was approved and that the payment of the third instalment was under preparation.

The presentation was continued with a summary of the last year's EAAD activities beginning with each of the four levels of intervention. Most partners have performed some activity on all levels. Particularly, activities on the special focus children and adolescents have increased.

Other project office activities regarding the promotion of the EAAD included presenting the EAAD at the EU Cross Policy Summit in Belgium in December and at the kick-off workshop for the project "strengthening research partnerships with Eastern Europe" in Bonn, Germany, in January.

It was further reported on the EAAD performance audit by the European Court of Auditors (ECA) that took place in Leipzig in February. The audit aims at evaluating the effectiveness and performance of the projects which were funded under the Public Health Programme of the European Commission (2003-2007) and its third strand Health Determinants. Around 36 project interviews and further stakeholder meetings and interviews are undertaken, which will feed into a Special Report on "if and how the EC ensures, that health promotion projects are managed effectively". This Report will be published only end of this year or beginning of the next year.

Katrin Gottlebe also reported on several overview articles that were submitted and are currently waiting for approval. The book chapter on suicide and self-harm in the Handbook of Primary Health Care (Prof. Robert Pelveler from the University of Southampton (England)) was submitted in December 2007. The book will be published end 2008. The column in the journal Psychiatric Services was submitted in February 2008. The e-text on depression and dysthymia to be published in cooperation with the EC funded project EUPHIX was submitted and is waiting for approval.

Since the last general meeting, the following articles have been published:

- Hegerl, U, Cibis, A, Arensman, E, Aromaa, E, van Audenhove, C, Bouleau, JH, van der Feltz-Cornelis, CM, Giupponi, G, Gusmão, R, Kopp, M, Marusic, A, Maxwell, M,

Meise, U, Óskarsson, H, Pull, C, Ricka, R, Schmidtke, A, Pérez Sola, V, Sisask, M, Wittenburg, L. (2008). European Alliance Against Depression – et fireplans intervensjonsprogram mot depresjon og suicidalitet [The European Alliance Against Depression – a four-level intervention programme against depression and suicidality]. *Suicidologi*, 13(1), 12-14.

- Hegerl, U, Wittmann, M, Arensman, E, Van Audenhove, C, Bouleau, J-H, van der Feltz-Cornelis, C, Gusmão, R., Kopp, M., Löhr, C, Maxwell, M, Meise, U, Mirjanič, M, Óskarsson, H, Pérez Sola, V, Pull, C, Pycha, R, Rička, R, Tuulari, J, Värnik, A, Pfeiffer-Gerschel, T. (2008). The European Alliance Against Depression (EAAD): A multifaceted, community based action programme against depression and suicidality. *The World Journal of Biological Psychiatry*, 9(1): 51-59.

The project office reported on the grant on strengthening research partnerships in suicide prevention with eastern and south eastern European partners. A total amount of 31.302€ was granted for 10 months (1.12.07-31.10.08) by the German Federal Ministry of Education and Research (BMBF). Within this amount, fees for accommodation of partners from Estonia, Hungary and Slovenia and costs of organizing the meetings (room rent, catering etc.) are granted. The project pursues two aims. The first aim is to strengthen existing partnerships between the German research team with research teams in Estonia, Hungary and Slovenia while exploring cross-national differences in suicidality. The second aim of this project is to support the continued expansion of regional networks in Estonia, Hungary and Slovenia and to support the expansion of the EAAD to new central, eastern and south-eastern European countries. The project office plans to hold a 4 days meeting for junior researchers in June. To account for knowledge transfer the subjects will be attending a train-the-trainer seminar, a workshop on fundraising from the industry, a seminar on marketing and public relations, and a seminar on dissemination of the 4-level-approach. Although the BMBF funding rules only allow to grant partners from Estonia, Hungary and Slovenia, all EAAD partners are invited to participate at these activities and the meeting.

NOTE:

The meeting is proposed to be held from 24 to 27 June 2008 in Leipzig.

Next, an update was given on the contacts of the project office to Macedonia and Latvia. A grant application for establishing an Alliance against Depression in Macedonia by Dr. Richter (Nuremberg) at the DFG, a German funding source, was rejected. She is now planning to approach German foundations for grants to realize the Macedonian alliance. In Latvia, an awareness campaign was started at the end of 2007 with TV clips and a website. They received good feedback and will start smaller activities this year.

Other activities the project office is currently involved in are the update of the campaign materials catalogue and the collection of the community capacity data. The materials catalogue will be added with a chapter on materials for children and adolescents. Further, it was proposed by Merike Sisask to add a list on country specific materials that are not available in English yet in national languages of the EAAD countries.

The topic of photograph usage was mentioned. The current status is that the Leipzig university lawyer is handling all the communication with Mr. Hohenacker's lawyer. The law firm is now collecting data on the continued use and download of the materials from the EAAD and partner websites.

How to deal with data inconsistencies - Methodology of data collection in general population surveys: Ella Arensman

Ella Arensman addressed methodological problems that occurred during the data collection for the paper "Opinions about Depression and Attitudes towards Suicidal Behaviour". First, only 9 centres responded to her request for data. Out of these 9 centres, only a smaller number can pool their data to a common dataset due to methodological inconsistencies. The methodological inconsistencies comprise different and quite selective samples (e.g. students), different data collection methods (self report vs. interview) different questionnaire items (suicide items were not always included), and different time frames in relation to the occurrence of depression and suicide in oneself and the relatives/friends. Sample selection is another problem that was addressed. If the sample was to be drawn from the telephone directory, young people might not be reached as they often are not listed. She invites the other partners to consider contributing their data to the dataset.

Ulrich Hegerl proposed that age and gender should be included in the formulation of hypotheses, e.g. older and male respondents answer more negative/inappropriate. Also, a country specific gender difference in relation to self-harm behaviour could be possible. This could be shown from official data. Ullrich Meise proposed that for later research one group should draw the design of the survey to avoid inconsistencies. He also asked to consider that the translation of the questionnaire into different languages might lead to inconsistencies.

Ulrich Hegerl proposes to form a steering group on the harmonisation of evaluation. The following partners signalled to join the steering group: Ella Arensman, Ulrich Hegerl, Ullrich Meise, Merike Sisask, Gert Scheerder. Ella Arensman will lead the group.

Publications Update: Publication leaders

Airi Värnik provided an update on a number of publications that the group from Estonia has been leading. The first paper 'Suicide methods in Europe: A gender specific analysis of countries participating in the European Alliance Against Depression' has been accepted for publication in the Journal of Community Health. (NOTE: The Project Office is currently awaiting the invoice from the publishing company so that the fee for free online access can be transferred.) Next, the manuscript 'Suicide methods among children and youths in European countries' was rejected from the British Journal of Psychiatry for the reason that the focus was not clinical enough. The paper will then be submitted to the Journal of Affective Disorders. Next the paper 'The relationship between national culture and choice of suicide method' is in preparation.

No news from the paper on Effects of EAAD campaigns on prescription of psychopharmaceuticals. Ulrich Hegerl proposed to form a work group to draw the minimal requirements for the data to be included. Anne-Claire Horel and Annabel Cebrià will join this work group. Ulrich Hegerl pointed out that a differentiation of prescription pattern by professional group is important.

Community facilitators' attitudes towards depression: baseline assessment prior to EAAD training programmes: Gert Scheerder

Gert Scheerder presented the results of attitudes of community facilitators prior to EAAD training program. He outlined the same methodological problems in combining data from several EAAD countries and proposed to use one validated instrument for all centres. However, he was able to include data from 9 countries (BEL, EST, FRA, GER, HUN, IRE, ITA, SCO, and SLO) with a total sample of 2670. Referring to the post-assessment, he revealed another problem which is the loss of data. Only for a subsample, post-assessment data is available, less data was collected and the sample is rather selective

(nurses). The aim of this paper is to explore the attitudes of CFs at the baseline level and to explore differences between different occupational groups within CFs.

As for the pre-assessment, CFs hold favourable attitudes in general (depression is a real disorder, can be treated etc), yet there is room for improvement by training. Significant associations were found regarding the age of the CFs meaning that older had less favourable attitudes toward antidepressants and patients with depression. General practitioners and medical health professionals had more favourable attitudes towards antidepressants and patients with depression than nurses, clergy, and social workers.

The results presented showed to be unique as there is no international study comparing CFs' attitudes. It is planned to submit the paper to the journal 'Social Psychiatry Psychiatric Epidemiology'. Ella Arensman suggested to highlight the pilot character of the study to be on the safe side for journal submission.

Update Portuguese Alliance against Depression: Carla Coelho

Carla Coelho reported about the progress of the Portuguese Alliance Against Depression. Due to delays and ambivalence of the officials in the regions, they were only able to start their activities in 2007 and have since been running their programme dedicatedly. She reported about the strategies applied to commit all persons involved – top down and bottom up. Besides the Medical Sciences Faculty of the New University of Lisbon, six further partners are involved in the alliance. The implementation takes place in 2 municipalities neighbouring Lisbon, Cascais and Oeiras, with about 400.000 citizens. Ms. Coelho then reported about the activities on the four levels. So far, 70 general practitioners were trained which comprises 50 % of the GPs in the respective region.

As for the future plans, the sustainability until 2011 is assured. During the next 2 years, the Medical Sciences Faculty will be directly in charge. Afterwards, the sustainability of the Cascais and Oeiras network will be maintained by the local partners. The leadership will then be sustained by the city council partners. The expansion to four other regions is planned and activities shall be extended to adolescents and elderly people.

Ullrich Meise asked about the special experiences they gathered in the work with GPs. Carlo Coelho highlighted that the Portuguese GPs are very thankful for the provision of knowledge on depression and suicide. A discussion about the specifics in the work with GPs, the special needs of GPs and ways of supporting the work of cooperating GPs followed (run info events for GPs in a pleasant setting – not at the university; provide for patients joining the GP events; award CME credits/other kinds of certificates to the GPs attending; start programmes e.g. with local quality circles and develop them together with the GPs; show complementarity of GPs and psychiatrists; let GPs talk about their motivation to come to the info event; focus on therapy – not on differential diagnosis; provide materials that make GPs independent once they have been trained (e.g. materials for patients and their families; decision aids for doctors; information about bibliotherapy, etc.)).

Gender aspects in Mental Health Promotion: Ullrich Meise

Prof. Meise reported on gender aspects in attitudes towards depressive and schizophrenic patients. Data was drawn from the school study and the University study that were conducted in 15 Tyrolean schools and the Medical University Innsbruck. For general results of this study see the minutes of the 6th GM in Barcelona.

The main result concerning gender was that social attitudes towards mentally ill persons depend not only on the symptoms of the different disorders, but also on the sex of the mentally ill person and, even more, on the sex of the respondents. In rating the male case vignette, respondents showed less favourable attitudes than towards the female

case. Male students, however, had less prosocial feelings, more anxiety and more aggressive feeling towards the cases than female students.

In conclusion, Prof. Meise pointed out that gender should be taken into account in planning of training workshops. He wondered why only 10-15% of the training participants were males and how this number could be increased. He also raised the topic of male specific symptoms/patterns of depressive behaviour/depression.

In the following discussion, the concept of male depression was debated.

Status of the OSPI application under the 7th EU framework programme: Ulrich Hegerl

Ulrich Hegerl gave a short overview on the aims of OSPI and the participants. He pointed out that OSPI is distinct from EAAD, also because the focus is on suicide, not only depression. However, synergy effects with EAAD should be used. He further gave some details about the evaluation summary report. OSPI attained an evaluation score of 14 out of 15. As a result of this, OSPI was invited to grant agreement negotiations with the EC. The first round is in progress. Annette Hohmann then gave some information about the negotiation schedule. All OSPI partners are asked to provide their participant information by 28 April (WORD templates were provided by GABO). The aim is to finish the negotiations as soon as possible to be able to start OSPI on 01 October 2008. Therefore, the partners were asked to start their staff and project planning now.

NOTE:

*The project office proposed some possible dates for the kick-off meeting. According to the feedback received so far, the preferred date is 27 October 2008. **All OSPI partners are kindly asked to note 27/28 October 2008 in their calendars, as the meeting will take one day and a half at least.***

It was proposed that project meetings could be held together with EAAD meetings to underline this cooperation. However, in terms of finance, the two projects have to be kept completely separate.

Plans for the sustainability of the EAAD: Ulrich Hegerl, Annette Hohmann

Ulrich Hegerl introduced the partners to the plans for sustainability of the EAAD network. At the last GM in Barcelona, the partners agreed to form a steering committee that would work out sustainability plans. He reported shortly on the work of the steering committee and the outcome. It is proposed to form a non-profit organisation under German law which is based in Leipzig. He continued to give an overview of the main points of the charter drafted by the Project Office according to the proposition of the steering committee on the EAAD future planning. A membership fee of 3000€ for constituting members and 5000€ for new members was proposed.

During the following discussion, several points were raised. Ella Arensman proposed to put up priorities for the work of the national alliances in order to better utilize the rather narrow resources. Ulrich Hegerl suggested that the national EAAD leadership centres could be run with very low budgets, as a huge part of the work has already been done and the materials and infrastructure are already available.

As for the membership fee, Airi Värnik and Högni Óskarsson suggested to adapt the fee to the GDP of the member countries, possibly according to the definition of the WPA (World Psychiatric Association). However, Ulrich Hegerl replied that raising fees should not be complicated. The partners then agreed on having a lower fee for countries from Eastern Europe.

NOTE:

It turned out that, according to the definition of the WPA, all EAAD countries but Hungary are high income countries; Hungary is listed under the subsequent category. The WPA countries list is available at www.wpanet.org.

Further, it was outlined that the national leadership centres were free to raise fees from their partners if they founded societies in their countries. This would enable them to pay the membership fee to the EAAD. Angela Ibelshäuser raised the question how long new members in the organisation had to pay a higher fee than constituting member. Annette Hohmann proposed that this financial advantage for constituting members should be set in the charter. Chantal van Audenhove suggested to reimburse possible surpluses to all members. Ella Arensman proposed to review the budget of the society on an annual basis and to recalculate the membership fees accordingly. Ulrich Hegerl agreed and proposed to adapt the fees in the way that half a position in the head office could be sustained. If the budget allows, constituting member should benefit e.g. by additional funding of activities or by suspension or reimbursement of the fee. Annette Hohmann suggested raising an amount of 3000€ for the first year and then to review it, taking into account the annual incomes of the EAAD society.

Ella Arensman emphasized that her institution had no financial flexibility as the amount of the membership fee has to be negotiated with the government in autumn. Therefore, she asked for a summary of the benefits that would be attained for the membership fee. Airi Värnik requested a detailed summary of the tasks of the head office in Leipzig.

At the end, those partners that had not participated in the steering committee on future planning had a clear impression of what the future plans are and were asked to check with their institutions whether they could sign the letter of intent. The majority supports the proposed idea of forming a non-profit organization.

Ulrich Hegerl summarized the results of the discussion as follows: Members from Eastern Europe shall pay a lower fee than others; the charter will not state a fixed amount of membership fee; the fee will be determined by the general assembly according to the financial statement of the past financial year, however the half position in Leipzig shall be sustained.

The next steps in the constituting process were then summarized by Annette Hohmann. All interested partners are requested to provide a signed letter of intent. GABO will then check the feasibility with the Leipzig authorities. For the constitution of the organisation the constituting members have to be present. This meeting might be combined with the OSPI kick-off meeting, given that the EAAD society has been approved by the German authorities by that date.

*Friday, 11 April, 2008
9:00 – 12:30*

Recent outcomes of the general population survey in Ireland: Ella Arensman

Ella Arensman presented results on opinions on depression and attitudes towards suicide in two neighbouring Irish regions (Cork and Kerry vs. East Waterford and Wexford-Kilkenny). Questionnaires that were used for the study were the Questionnaire on opinions about depression (NAAD; Hegerl et al. 2003) and Attitudes towards Suicide (ATTS; Renberg, 2001). The results presented were drawn from the baseline assessment before the intervention. The post-assessment is planned.

Whereas demographic characteristics in the both regions were equal, analyses revealed significant differences between the intervention and the control region in regard to Self

Reported Prevalence of Depression and Suicidal Behaviour, opinions towards depression and attitudes towards suicide. The control region had significantly less appropriate opinions towards depression (e.g. The causes of depression are unknown). In contrast, attitudes towards suicide were more appropriate in the control region. It was also shown that younger people hold a more appropriate attitude towards depression and suicide than older people (>50 years). This was explained by the high taboo and stigmatization that existed in Ireland, where suicide was decriminalised only in 1993. Further, females showed more appropriate attitudes towards suicide than males. Ella Arensman pointed out another methodological phenomenon. Analyses showed significant differences between postal and telephone interviews. In the postal interview, people were significantly more undecided than in the telephone interview.

Ella Arensman concluded that the baseline findings highlight the need for increased awareness about depression and suicidal behaviour among the general public. For the follow-up assessment, she expects positive changes in the intervention region, whereas no changes should occur in the control region. Besides the intervention, one should also keep track on other additional interventions and suicide incidents in both regions because they might influence the effect of the EAAD intervention.

In the discussion, Ullrich Meise pointed out that the sample of the survey could be biased by the use of the telephone directory. Ella Arensman agreed and pointed out that young people might be underrepresented as they often are not present in the telephone directory.

Supraregional activities in Switzerland: Thomas Reisch

Thomas Reisch gave an overview on the activities in Switzerland. First, he introduced characteristics of the Swiss structures that are very federalist and cantons that are very different in regard to regulations and also to prevention activities. He reported about an initiative for a new law of prevention and health promotion that will come about 2010 and which shall cover psychiatric disorders.

He then introduced some federal activities in the field of prevention of suicide and depression, e.g. the Sentinella program where epidemiological data on depression is collected by GPs. Also, initiatives by the Federal Department of Defence, Civil Protection and Sport and the Federal Roads Office were described in order to increase safety in regard to army firearms in private households and the security of bridges. He described an example of the safety of bridges where a net was installed at the Bern Münster terrace, which led to a decrease of suicide at the terrace and a decrease of suicide by jumping in the whole Bern area as well.

He finished his talk with the presentation of supraregional activities in Switzerland that are partly ongoing (e.g. Bern, Luzern) and partly in the preparation stage (e.g. Zurich, Thurgau). The cantonal activities cannot be funded by the federal government and therefore need financial support from the cantons whose possibilities differ strongly. However, in Bern, suicidal behaviour is being monitored. Yet, so far no clear effects could be shown after the intervention.

In the following discussion, Ulrich Hegerl pointed out that no valid conclusion can be drawn on the effect of the increased security of bridges as the case numbers are too small. Ella Arensman added that the Swiss findings are consistent with results from New Zealand and that the restriction of means is an important, yet not the only pillar in suicide prevention.

EAAD in Sabadell, Spain: Annabel Cebrià

First, Annabel Cebrià presented the general activities of the Spanish alliance against depression in the city of Sabadell. They had their kick-off event on 19 September 2007;

it was supported by the Catalan Health Minister Dr. Geli. They were able to include 14 primary care centres, 4 mental health care centres and addiction centres, and with this, the alliance will cover a population of about 200.000 inhabitants.

Currently, four projects are conducted. At the GP level, the assessment of knowledge and attitudes about depression after a three-session workshop is conducted. Another project is suicide prevention. Based on the registered suicide attempts in the ER of the general hospital, a follow-up program will be developed to prevent suicides. The third project focuses on adolescents and their opinions and attitudes towards depression and suicide. This school project is addressed to 14-16 years old student. It has three main aims: evaluate knowledge and attitudes concerning depression before and after a workshop on depression; study the prevalence of depression in adolescents; adapt and validate the EAAD questionnaire on attitudes and knowledge about depression to Catalan language. As a result of the screening in the schools with the Beck Depression Inventory (BDI), also treatment will be offered to concerned adolescents.

In the discussion, Ella Arensman raised the point of using the BDI as a screening instrument in an adolescent sample. Diego Palao replied that the children's depression inventory was regarded as too infantile for this age group.

Recent development of the EAAD in Italy / Suggestions for new research topics: Roger Pycha

Roger Pycha started with the presentation of EAAD activities in South Tyrol. Two books were published for priests ("Pastoral of Crisis": church service texts about depression) and teachers ("Ups and downs: Crisis as a school matter": 4 school lessons about depression). Further, a modern art exhibition with the title "The Exhausted Self" was organized that received very controversial feedback from the general public and the media.

He continued with expansion activities in whole Italy. Three responsibility regions were established (northern, central and southern Italy – Trentino, Lazio, Abruzzo) with one main coordinator, Prof. Roberto Tatarelli of Rome University and three sub-coordinators for the three regions. EAAD is going to be implemented in three regions in a restricted way due to lack of funding.

Based on findings of a study in the Autonomous Province of Bolzano (South Tyrol) using psychological autopsy methods, he proposed three research topics:

- Study on the ethnic differences in suicide rates
- Study on the influence of alcohol abuse on suicide rates in the various ethnicities
- Study on the influence of meteorological factors on suicide rates

A discussion about the topics proposed followed. Several hypotheses were raised explaining the finding in the South Tyrolean sample. Högni Óskarsson pointed to possible differences in the suicide methods between the ethnicities. Ella Arensman proposed an influence of alcohol abuse on the rates of suicide, yet pointed out that long-term studies will be needed to prove this hypothesis. Also, Kairi Kölves proposed that different drinking patterns could be a moderating variable. Roger Pycha raised the question of salutogenesis: How do the Italians, whose suicide rates are low, protect themselves against suicide? He also suggested a possible genetic influence. Chantal Van Audenhove indicated on sociological aspects that might influence the suicide rates.

Activities of the Icelandic Alliance Against Depression: Högni Óskarsson

Högni Óskarsson gave a short introduction on the Icelandic activities. He reported on two programmes for high risk groups that are currently ongoing in Iceland. First, there is a nationwide tour with seminars for relatives of mentally ill. So far, 800 people participated in the seminars. In Iceland, there are 24 self-help groups that are supported by priests,

nurses and local professionals. Another project is the training of mental health workers at the University Hospital who work with children and families of mentally ill persons. The aim is to break the silence and confusion within the families. The project is conducted by 16 professionals that carry out the training and the supervision of the mental health workers. Högni Óskarsson also reports that the PR campaign for children will start in early May. Educational material was prepared and also a website with contact information is online.

Ullrich Meise proposed to include a forum in the website which, as Högni Óskarsson replies, is planned. He also points out that cooperation with priests is an important field as this professional group is very close to the people concerned, yet receives the least support.

Organizational aspects: Annette Hohmann

To end the meeting, Annette Hohmann addressed some organizational aspects: status of the third instalment, no-cost extension of EAAD II, and the final report after the end of the project.

The Leipzig Project Office is going to ask for an **amendment for a no-cost extension** of EAAD II up to December 2008. This extension has the advantage that left-over money could be carried forward over the official end of EAAD II in June 2008. Further, this extension offers the possibility to re-budget the actual costs of the project. If it was decided to ask for this amendment, the final report would be due in February 2009, and consequently, the last instalment would be received in April 2009 at the earliest.

In the discussion of this issue, Airi Värnik and Ells Arensman expressed their concern about the last instalment being paid so late as their institutions are small and not able to bridge a long financial gap. Airi Värnik further proposed to start the society in June, yet Annette Hohmann replied that this was not feasible as the concept had to be checked first with the Leipzig authorities whose schedule is not predictable. Ullrich Meise proposed a compromise to extend the project up to October 2008, yet Högni Óskarsson expressed preference for the extension up to December. Also Slovenia and Portugal are in advantage for the extension.

Ella Arensman further expressed some displeasure about the payment system of the PHEA. for a small institution such as the NSRF, the retroactive payment of the instalments is very disadvantageous as they do not have enough financial flexibility to pre-finance work. It would have also been favourable if representatives of the EC/PHEA had attended the project meetings more often as this might have brought a better understanding. Unfortunately, Stephan Van den Broucke could not be present in Reykjavik for health reasons.

Annette Hohmann also gave some preparatory information on the **final report** that will be due respectively in October or in early 2009 if the no-cost extension is agreed on. She asked the partners to contact their financial departments betimes for the financial statements and to be prepared to possibly submit accounting documents to the PHEA. She concludes that an early submission of the final report also means an early payment of the last instalment.

NOTE:

Subsequent to the meeting, the Project Office decided to request for a no-cost extension until 31 December 2008. The request for an amendment of the Grant Agreement was submitted on 22 May 2008. The NSRF and the ERSI who will suffer most from the belated PHEA payment will most probably be able to bridge the gap with the OSPI funds in the meantime.

7th EAAD General Meeting
10/11 April 2008
Reykjavík, Iceland



NEXT STEPS:

- To form a work group on the harmonization of the EAAD evaluation. Lead: Ella Arensman; members: Ulrich Hegerl, Ullrich Meise, Merike Sisask, Gert Scheerder
 - 13 June 2008 Ella Arensman to set up aims and tasks of the group
- To form a work group in charge of the minimal data requirements for the paper on the prescription of psychopharmaceuticals: Lead: Ulrich Hegerl; members: Anne-Claire Horel, Annabel Cebrià, Katrin Gottlebe
 - 13 June 2008 Project Office will prepare suggestions and mail them to the members of the work group and for information to all partners
 - 1 July 2008 feedback on the suggestions
 - 30 July 2008 agreement on indicators, methodological approach, and analyses for the paper
- To draft a summary of the benefits of a membership in the EAAD non-profit society and a summary of the support given by / the tasks of the Leipzig head office. Responsible: Project Office.
- To make an inquiry with the Leipzig financial authorities concerning the formation of the EAAD non-profit society. Responsible: GABO

Katrin Gottlebe / Annette Hohmann
02 June 2008

List of Participants

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